Texas

Texas Commission of Environmental Quality (TCEQ)

Re: 7520 Reports for the Fourth Quarter of FY2013

4th Quarter Period: (October 1, 2012 --- September 30, 2013)

Date: (Tuesday) October 29, 2013

Time: 4:39pm

Reference File
Code: WA-UI-PP

Please Type or pi	rint all information. I	lease re	ad instructions			OMB No.	2040-004	42 Expire	s 11/30/20	014				
	United Stat Office of UIC Part 1: Permit Rev (This i authority	I. No	I. Name and Address of Reporting Agency Texas Commission on Environmental Quality (TCEQ) P.O. Box 13087 Austin, Texas 78711-3087											
II. Date Prepared (month, day, year)	IV. Reporting Period (Month, Year)												
October 29, 201	3		III. State Contact (name, telephon Sonia I. Simmons (512) 239-6470		From	October per 1, 201		ionan, rear	To September 30, 2013					
					Class	and Type	of Injectic	n Walla	<u> </u>					
					Ciuss	II	or injectic	ni wens	T	T				
			Item		1	SWD 2D	ER 2R	HC	 	IV	V			
V. Permit Application	Number of Permi	t Applie	ations Received		12	20	21	2H	0	0	0			
	D	Α	Number of Individual	New Wells	3				0	NA	0			
VI.	Permit		Permits issued (one well)	Existing Wells	16				0	NA	0			
Permit	issued		Number of area Permits* issued	New Well Field	0				0	NA	0			
Determination		В	(multiple wells) (see instructions on back)	Existing Well Field	0				1	NA	0			
	,	c	Number of Wells in Area of Permits	New Wells	NA				NA	NA	NA			
			(See B above)	Existing Wells	NA				NA	NA .	NA			
	Permit Not Issued	D	Number of Permits Denied/Withd (After complete technical review)	rawn	ı				0	NA/	0			
	Modification Issued	Е	Number of Major Permit Modifications Approved		4				1	NA	0			
VII. Permit File	Number of Rule-A	ed	Wells Reviewed	NA				NA	NA	NA				
Review	Class II Wells Rev	riewed	·	Wells Deficient	NA				NA	NA	NA			
	Wells		Number of wells	Abandoned Wells	NA				NA	NA	NA			
	Reviewed	A	In Area of Review	Other Wells	NA				NA	NA	NA			
	Wells Identified	В	Number of Wells Identified	Abandoned Wells	0				NA	NA	NA			
VIII.	for C/A		For Corrective Action	Other Wells	0				NA	NA	NA			
Area of Review			Number of Wells in AOR with casing Repaired/Recemented						NA	NA	NA			
(AOR)	Wells with	С	Number of Active Wells in AOI Plugged/Abandoned.	R					NA	NA	NA			
	C/A		Number of Abandoned Wells in AOR Replugged.						NA	NA	NA			
			4. Number of wells in AOR with "Other" Corrective Action.						NA	NA	NA			
	e Report (Attach addi								•					
Certification: Le	ertify that the stateme	nts I hav	re made on this form and all attachment imprisonment or both under Applic	ents thereto are tru	ie, accurate	and comp	lete. I ac	knowledge	that any k	nowingly f	alse or			
Signature and Typed	or Printed Name and	Title of	or imprisonment or both under applic Person Completing Form Material and UIC Inspector	able law.	mm		Date			Telephon				
	0-1 (Rev. 12-11)		Previous edition is obsolete				Octo	ber 29, 201	13	(512) 239	-6470			

Reference File Code: WA-UI-PP

⇒EP	I.Name and Address of Reporting Agency Texas Commission on Environmental Quality (TCEQ) P.O. Box 13087 Austin, Texas 78711-3087														
II. Date prepared	(month, day,	he Safe Drinking Water Act) III. State Contact (name, Telephone no.)	IV. Repe	orting Per	iod (Mo	nth, year	r)								
year) October 2	9, 2013	Sonia I. Simmons (512) 239-6470	From: C	ctober 1.	, 2012		To: September 30, 2013								
			Class and Type of Injection Wells												
				- 11											
		Item		SWD	SWD ER		+		(
			1	2D	2R	HC 2H	III	IV	V						
	Total Wells	Number of Wells with Violations	5				0		0						
		Number of Unauthorized Injection Violations	0				0		0						
V.	Total Violations	Number of Mechanical Integrity Violations	1				0		0						
Summary		Number of Operation and Maintenance Violations	11				0		0						
of Violations		Number of Plugging and Abandonment Violations	0				0		0						
		Number of Monitoring and Reporting Violations	2				0		0						
		6. Number of Other Violations (Specify)	*1 See below				0		0						
	Total Wells	Number of Wells with Enforcement Actions	0				0		0						
		1. Number of Notices of Violation	5				0		0						
		2. Number of Consent Agreements	0				0		0						
VI.		3. Number of Administrative Orders	2				0		0						
Summary	Total	4. Number of Civil Referrals	0				0		0						
of	Enforcement	5. Number of Criminal Referrals	0				0		0						
	Actions	6. Number of Well Shut-ins	0				0		0						
Enforcement	, tettons	7. Number of Pipeline Severances	0				0		0						
		8.Number of Other Enforcement Actions (Specify)	0				0		0						
VII.	Number of	A. This Quarter	5				0		0						
Summary of Compliance	Wells Returned to Compliance	B. This Year	5				0		0						
VIII. Contamination		es of Alleged Contamination of a USDW	0			***************************************	0		0						
IX. MIT Resolved		Violations Resolved in 90 Days	100				NA		NA						
		ach additional sheet if necessary)							1						
Certification: I d	certify that the sta	stements I have made on this form and all attach alse or misleading statement may be punishable	ments thereto	are true,	accurate nt or bo	and con	nplete.	w.	I						
Signature and Ty	ped or Printed N		mia		nın	Date	per 29, 2013	Tele	phone No.) 239-6470						

EPA Form 7520-2A (12-11) Replaces EPA Form 7520-2 which is obsolete

*Number of Other Violations for Class I: Recordkeeping

Reference File Code: WA-UI-PP

United States Environmental Protection Agency Office of Ground Water & Drinking Water Washington, DC 20460 UIC Federal Reporting System Part II: Compliance Evaluation Significant Noncompliance (This information is solicited under the authority of the Safe Drinking Water Act)						OMB No. 2040-0042 Approval Expires 11/30/2014 1.Name and Address of Reporting Agency Texas Commission on Environmental Quality (TCEQ) P.O. Box 13087 Austin, Texas 78711-3087												
. Date Prepared (i October 29, 201	Fro			То														
		ober 1, 20			mber 3	0, 2013												
				Cia	ss and Typ	e or inje	ction w	T		T								
			Item	ı	SWD 2D	ER 2R	HC 2H	Ш	IV		V							
	Total Wells	A	Number of Wells with SNC Violations	5				0		0								
V. Summary			Number of unauthorized Injection SNC Violations				0		0									
of			Number of Mechanical Integrity SNC Violations	0				0		0								
Significant	Total Violations	В	3. Number of Injection Pressure SNC Violations	0				0		0								
Non-			4. Number of Plugging and Abandonment SNC Violations	0			-	0		0								
Compliance			5. Number of SNC Violations of Formal Ord	ers 0				0		0								
(SNC)			Number of Falsification SNC Violations	0				0		0								
			7. Number of Other SNC Violations (Specify)	0				0		0								
	Total Wells	A	Number of Wells with Enforcement Actions Against SNC	0				0		0								
			1. Number of Notices of Violation	5				0		0								
VI.	7		2. Number of Consent Agreements/Order	0				0		0								
Summary			3. Number of Administrative Orders	2				0		0								
Jannary	Total	В	4. Number of Civil Referrals	0				0		0								
of	Enforcement	1	5. Number of Criminal Referrals	0				0		0								
Enforcement	Actions		6. Number of Well Shut-ins	0				0		0								
Against	Actions		7. Number of Pipeline Severences	0	1			0		0								
SNC			8. Number of Other Enforcement Actions against SNC Violations (Specify)	0	4			0		0								
VII.	Number of Wel		A. This Quarter	5				NA		NA								
ummary of ompliance	SNC Returned to Compliance B. This Year							NA		NA								
VIII. Contamination			Alleged Contamination of a USDW g Class V Well Closures	0			0		0									
IX. /ell Closure	Clos	nvoluntary sure				0												
Certification: cer	tify that statemer	ts I ł	nave made on this form and all attachments the	reto are	Voluntary \ true, accur		-	te. I acl	[6 mowledg	e that	any knowingly							

EPA FORM 7520-2B (12-11) Replaces EPA Form 7520-2 which is obsolete

> Reference File Code: WA-UI-PP

(512)239-6470

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460 UIC Federal Reporting System Part 101: Inspections Mechanical Integrity Testing (This information is solicated under the authority of the Safe Drinking Water Act)						OMB No. 2040-0042 Approval Expires 12/31/2011 1. Name and Address of Reporting Agency Texns Commission on Environmental Quality (TCEQ) P.D. Box 13087 Austin. Texas 78/711-3087											
Date Prepared (October 29, 20	PV. Reporting Period (month, year)																
October 29, 20	From (Detober	1, 201	2	ber 30, 2013												
ltem					id Type												
Hem					П			T									
					1	SWD 2D	ER 2R	HC 2H	Ш	IV	v						
	Total Wells	A	Number of Wells inspected		*83			211	39		0						
٧.			Number of Mechanical Integrit (MIT) Witnessed	ly Tests	59				0		0						
Summary			Number of Emergency Response or Complaint Response Inspections Number of Well Constructions Witnessed						0		0						
of	Total								0		0						
Inspections	Inspections	В	4. Number of Well Plugging Witt	0				0		0							
		1	5. Number of Routine/Periodic In	0				2		0							
	Total	Α	Number of wells tested or evaluat Mechanical Integrity (MI)	101				**145		NA							
VI	Wells	В		Passed 2-part test	NA				NA		NA						
Summary			Tesled/Evaluated for MIT	0				NA		NA							
e f		and the same of	Number of Annulus Pressure Monitoring Record Evaluations	Well Passed	-	-			NA		Na						
151	For	-	Number of Casing/	Well Failed Well Passed					NA NA		NA						
Mechanical			Tubong Pressure Tests	Well Failed	94						NA						
Integrity	Significant		3. Number of Monitoring	Well Passed	NA.				NA NA		NA NA						
(MI)	Leak		Record Evaluations	Well Failed	NA				NA NA		NA NA						
			4. No. of Other Significant Leak Tests/Evaluations (Specify) (Casing Pressure Test) Well Passed		4				NA		NA .						
				Well Failed	G				NA		NA						
			Number of Camena	Well Passed	NA		_		NA		NA						
		-	Record Evaluations	Well Failed	NA				NA		NA						
	For		2. Number of Temperature/		23		-		NA		NA						
	Fluid	D	Noise Log Tests 3. No. of Radioactive Tracer/		0	-	-		NA		NA						
	Migration		Cement bond Tests		91				NA		NA						
			4. No. of Other Fluid Migration	***************************************	NA		+		NA I		N.A.						
			Tests/Evaluations (Specify)	Well Failed	NA				NA		NA -						
VIL	Total Wells	Α	Number of Wells with Remedial A		4				NA		NA						
Summary	Total		1. Number of Casing Repaired/Squ Remedial Actions		0				NA		NA						
of Remedial	Remedial		2. Number of Tubing/Packer Remu		4		,		NA		NA						
Actions	Action	-	Number of Plugging/Abandonia Actions Number of Others						NA		NA						
-	ne Reposite i Iro		 Number of Other Remedial Acts (ditional sheets) 	ons (Specific)	0				NA .		NA .						
fication: I certifingly false or m	fy that statemer islending statem	ds I	have made on this form and all atta	chments thereto	are true,	accurate,	and o	ounplet	e. Laieki	owled	ge that any						
ture and Typed	or Printed Nam	e an	d Title of Person Completing Form elioactive Material and UIC Insp	Adona d	Surv	plicable	b	Date	r 29., 20		Telephone No. (512) 239-6470						

^{*} Total number of wells inspected: This number includes 59 MIT observations and 24 Compliance Evaluation Inspections of Class I wells At the Uranium & Non Uranium TCEQ's permitted facilities.

Out of the 145 Class III wells MI tested, two wells failed. The two wells were plugged.

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460 UIC Federal Reporting System Part IV: Quarterly Exceptions List (This information is collected under the authority of the Safe Drinking Water)											OMB No. 2040-0042 Approval expires 11/30/2014 Name and Address of Reporting Agency Texas Commission on Environmental Quality (TCEQ) P.O.Box 13087 Austin, Texas 78711-3087 I. Reporting Period									
					*****						From October 1, 2012					To Se	ptemb	er 30,	2013	
II.	III.																			
Well Class	Name and Address	IV. Well ID No. (Permit No.)	Date of Violation	Mark ("X") Vi			iolation Type					Mark ("X") Violation Type								VI.
and Type	of Owner/Operator			Unauthorized	Wall	Injection	Plugging and	Formal Order	Ealsification	Other	Date of Enforcement	Notice of	Consent	Administrativ	Civil Referral	Criminal	Well Shot in	Dipalina	Other	Date Compliance Achieved
	VV-4511-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-																+	Ŧ		
CERTIFICATION I certify imprisor	that the statements I have made on nment or both under applicable law.	this form and all attachn	nents thereto are true	e, accura	ate, an	d comp	olete. I	acknow	wledge	that a	ny knowingly false or	mislea	nding s	statem	ent m	ay be p	punisha	able by	y fine or	
Signature of Person	Completing Form	Typed or Printed ! Sonia I. Simmons		nd Titl	le			***************************************		Date Telephone No. October 29, 2013 (512) 239-64										

EPA Form 7520-4 (Rev. 12-11)

NOTE: There were no wells with Significant Non Compliance for two or more consecutive quarters without being addressed with a formal enforcement action or returned to compliance for this reporting period.

Health Physicist/Radioactive Material and UIC Inspector

(512) 239-6470

Reference File Code: WA-UI-PP